

# Mayo Clinic Q&A: Eating disorders can affect people of all ages

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Dear Mayo Clinic: Is it common for someone in their 50s to develop an eating disorder?

A: Although eating [disorders](#) are most common in adolescents or [young adults](#), they can affect people of all ages—even into older adulthood. Eating disorders are serious conditions related to persistent eating behaviors that affect health, emotions and functional ability in important areas of life. The three most common types of eating disorders are anorexia nervosa, bulimia nervosa and [binge-eating disorder](#). Others include rumination disorder and avoidant or restrictive food intake disorder.

Anorexia nervosa is characterized by an intense fear of gaining weight and a distorted perception of weight or shape. People with anorexia may excessively limit calories or use other methods to lose weight, such as excessive exercise, or the use of laxatives or diet aids. These people may reach an abnormally low body weight. Or fear of weight gain may be supplemented by shame over calorie intake, which may be relieved by vomiting (purging) or using laxatives.

With bulimia, people typically eat a large amount of food at one time (binge). Then, driven by shame, they try to rid themselves of the extra calories in an unhealthy way, such as vomiting.

Binge-eating disorder is marked by impulsivity. People with binge-eating disorder regularly eat too much and feel a lack of control over their eating. But unlike those with anorexia or bulimia, they don't try to compensate for this behavior. Binge-eating disorder is believed to be the most prevalent eating disorder in [older adults](#).

Older adults experience many of the same body image concerns as their younger counterparts. One large study found that levels of body dissatisfaction remained constant in women of all ages, while another study noted body dissatisfaction and "feeling fat" being reported even by women at a healthy weight. Societal pressures to be thin are linked to eating disorders in older adults just as they are in adolescents and younger adults. These feelings may be compounded by factors such as excessive life stress, menopause concerns and fear over age-related appearance changes.

One misconception is that an eating disorder is simply a lifestyle choice. Research shows that these disorders result from a complex interaction of genetic, biological, behavioral, psychological and social factors. In particular, the brain circuitry alterations seen in people who've undergone the semistarvation found in many eating disorders may complicate recovery and increase the likelihood of relapse.

An eating disorder often is managed with a team approach, including input from healthcare providers, including [mental health professionals](#) and dietitians. While the treatment depends on the type of disorder, it often involves refeeding, nutritional education and counseling. A medication also may be recommended, particularly for those who have binge-eating disorder.

Cognitive behavioral therapy commonly is used to treat eating disorders. Cognitive behavioral therapy can help those with an eating disorder learn how to monitor and improve their eating habits, develop problem-solving skills, and explore healthy ways to cope with feelings and life situations. Medications can't cure an eating disorder, but some—such as the stimulant lisdexamfetamine (Vyvanse) - may help control urges to binge and purge, or manage excessive preoccupation with diet.

Most of this treatment can be done on an outpatient basis. However, people with severe malnutrition due to anorexia—or with serious health issues due to binge-eating disorder—may require hospitalization or admission into a specialized [eating disorder](#) program.

If you need help with diet-based behaviors or your feelings about your body, ask for help. By seeking treatment, you can avoid a number of serious health complications and ultimately prolong your life. Similarly, if a loved one appears to be showing signs of one of these issues, encourage him or her to talk to a health professional. By expressing concern and a desire to listen, you may open the door for him or her to accept help.

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